

625 SOUTH HEWITT DRIVE  
 HEWITT TX 76643  
 254-666-7314  
 254-420-1642 FAX  
 www.brazosmeadows.org

# BRAZOS MEADOWS BAPTIST CHURCH

## Employment Application

(Please note: This employment application will become void and not considered after 30 days from the date of application. After the 30 day period, it will be necessary to submit a new application to be considered for employment.)

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Position Applied for	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you a member of a Baptist Church Yes <input type="checkbox"/> No <input type="checkbox"/> Church Location _____			

List any denomination or church of which you have been a member, including location and contact information, and all previous church service, volunteer or paid, you have provided since you were 18 years of age. Please include approximate dates.

Church	Address	Date	Service

Do you have any friends or relatives presently or formerly employed by Brazos Meadows Baptist Church? Yes \_\_\_ No \_\_\_ If, yes, please identify by name and relationship.


Have you previously applied for employment with or worked for Brazos Meadows Baptist Church? Yes \_\_\_ No \_\_\_ if yes, please identify the dates of employment or the date of application


EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Years completed (circle) 1 2 3 4
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

Do you have any special skills, training, or experience that would apply to the job for which you are an applicant?

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Please describe any additional qualifications that would assist the church in evaluating your application.

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Do you consider yourself a positive role model?

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Because the church cares for our members, including our children, and desires to protect them, we ask you to please answer the following questions. We understand the questions are personal and we will protect your privacy.

Is there any reason, including those that are physical or mental health related, that might keep you from effectively working with children or that might cause a child potential harm?

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Have you ever been charged with, indicted for, or pled guilty to a crime? Yes  No  If yes, please explain:

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Have you ever been charged with, indicted for, or pled guilty to an action prohibited by the Texas Family Code, or a similar code in any state? Yes  No  If yes, please explain:

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Have you ever been known by any other name? If yes, please list all other names, including maiden name:

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Would you be willing to be fingerprinted? Yes  No

If you have a disability or impairment, describe or demonstrate how with or without reasonable accommodations you would be able to perform job-related functions.

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Is there any health related reason that would keep you from effectively working with members or cause any potential harm to our members?

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*(If you were personally a victim of child abuse, we require that you make this information known to the minister under whose leadership you will serve. Admitting you were a victim will not automatically disqualify you from service. Your confidence will be respected and appreciated.)*

*You may choose to set an appointment with the Chairman of the Personnel Committee and discuss the answer to any of these questions personally rather than provide the information on this form. Your answers will be kept confidential.)*

<b>PRESENT EMPLOYER</b>			
Company		Phone (    )	
Address			
Job Title	Starting Salary \$	Present Salary \$	
Responsibilities			
From	To	Reason for Leaving	
<b>PREVIOUS EMPLOYMENT</b>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

**REFERENCES**

*Please list three professional references.*

Full Name	Relationship
Company	Phone (     )
Address	
<hr/>	
Full Name	Relationship
Company	Phone (     )
Address	
<hr/>	
Full Name	Relationship
Company	Phone (     )
Address	

The information contained in this application is correct to the best of my knowledge. I authorize the church to obtain information from references, employers and churches listed herein. I also authorize any references, churches or other organizations or employers listed in this application to give you any information, including opinions that they may have regarding my character and fitness for the job I am applying. In consideration of the receipt and evaluation of this application by the church, I hereby release any individual, church, children's organization, charity, employer, reference, or any other person or organization, both collectively and individually, from any and all liability for damages or whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and Policies of the Church, which are adopted from time to time, and to refrain from unscriptural conduct in the performance of my services on behalf of the Church. I have been apprised of, understand and support the Church position on the problem of child abuse.

I further state that I have carefully read the foregoing release and know the contents thereof; and sign this release as my own free act. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

In the event I am employed, I understand all employees are subject to termination at the discretion of the Church. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time, and if I choose to give proper notice of termination, the Church may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the Church, my compensation (if any), hours of service and all other terms and conditions of employment are subject to modification or change by the Church at the Church's discretion.

I understand that, if employed, any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice.

I authorize the Church to supply my employment record, in whole or in part, and in confidence, to any prospective or future employer, governmental agency, or other party, with a legal and proper interest therein.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**MISSION STATEMENT**

**BRAZOS MEADOWS EXISTS TO EXALT THE PERSON AND WORK OF JESUS CHRIST, JOINING GOD AS HE DRAWS PEOPLE INTO A REDEMPTIVE AND CONTINUOUS RELATIONSHIP WITH HIMSELF, ENCOURAGING THOSE HE SENDS OUR WAY, AND EQUIPPING THEM FOR A MISSION IN THE WORLD.**